If you wish to reserve space immediately, please fill out and sign the following insertion order. Please tear out and fax to the appropriate regional account executive. Contact information for regional account executive is on the back page.

Contact Information - Please	Print or Type			
Organization Name				
Contact Name				
Title				
Address				
City, State, Zip				
E-mail Address				
Phone Number				
Fax Number				
				1
Publication	Size/Ad Type	Item Price	Quantity	Total
				\$
			2008 Total	\$
			2009 Total	\$
All advertising commitments for the 2008-20 advertising fee for each 2008-2009 Indiana once each year of the publication.				
State Contract Approval: In accordance with party must be approved by (1) the commiss of the State Budget Agency, and (3) the atto contract agreement between the Organizat with the above Indiana statute.	sioner of the Indiana Departn rney general, as required by I	nent of Administrat Indiana Code 4-13-	ion, (2) the direc -2-14.3. A separ	tor ate
Non-Collusion and Acceptance: The undersig Organization listed above, or that he/she is t of the Organization, that he/she has not, not of the Organization, directly or indirectly, to any combination, collusion or agreement to of money or other consideration for the exe- other than that which appears upon the face	he properly authorized repre r has any other member, em the best of his/her knowledge receive or pay, and that he/ cution of this insertion order	sentative, agent, n ployee, representa e, entered into or a	nember or office tive, agent or of ffered to enter in	ficer nto
My signature below verifies I have read and Development is hereby authorized to place				on.
Advertiser's Signature		Date		
IMPORTANT: KEEP A COPY OF YOUR COMPLE	TED INSERTION ORDER FOR Y	OUR RECORDS.		